

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

MARK PLAIA, ET AL.

Serial No.: 09/938,882

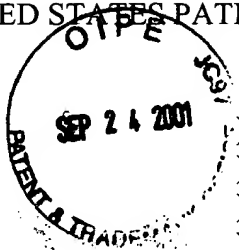
Filed: August 24, 2001

For: ANTI-STENOTIC METHOD AND)
PRODUCT FOR OCCLUDED AND)
PARTIALLY OCCLUDED ARTERIES)

Docket: 5770.CD2C.2

Art Unit:

Examiner:



4
Pre Amended
J. Byer
11/30/01

AMENDMENT BEFORE FIRST ACTION

Honorable Commissioner for Patents and Trademarks
Washington, D.C. 20231

Sir:

Please amend the above-identified application as follows:

IN THE CLAIMS:

Please amend Claim 105 as follows:

09/26/2001 AOSMAN1 00000045 061620 09938882

01 FC:202 80.00 CH
02 FC:203 99.00 CH

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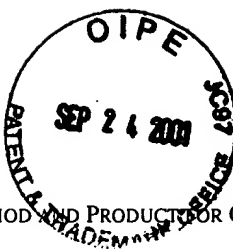
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Box Fee Amendment, Assistant Commissioner for Patents, Washington, D.C. 20231 on September 19, 2001.


Lynn G. Foster

In re application of:
Serial No.:
Filed:
For:

MARK PLAIA, ET AL.
09/938,882
August 24, 2001

ANTI-STENOTIC METHOD AND PRODUCT FOR OCCLUDED AND PARTIALLY OCCLUDED ARTERIES



Case Docket No. 5770.CD2C.2

3738

THE COMMISSIONER OF PATENTS AND TRADEMARKS
WASHINGTON, D.C. 20231

Sir:

Transmitted herewith is an Amendment in the above identified application.

☒ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.

☐ A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

☐ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	(Small Entity)		(Other than Small Entity)	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Additional Fee	Rate	Additional Fee
Total	31	minus	20	11	x \$9	\$99.00	x \$22	\$
Indep.	10	minus	8	2	x \$40	\$80.00	x \$82	\$
First Presentation of Multiple Dep.					+ \$135	\$	+ \$270	\$
Total Additional Fee					\$179.00		\$	

* If entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If less than 20 in this space, write "20" in this space.

*** If less than 3 in this space, write "3" in this space.

"Highest No. Previously Paid For" is highest no. in Col. 1 from prior Amendment or number of claims originally filed.

☒ Please charge my Deposit Account No. 06-1620 in the amount of \$179.00. A duplicate copy of this sheet is attached.

☐ A check in the amount of \$_____ is attached.

☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 06-1620. A duplicate copy of this sheet is attached.

☒ Any filing fee under 47 CFR 1.16 for the presentation of extra claims.

☒ Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

Lynn G. Foster
Attorney for Applicant

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Salt Lake City, Utah 84102
Telephone: (801) 364-5633

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Lynn G. Foster